

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That I, (NAME), residing at (WHERE – City, State, Country), am the (RELATIONSHIP TO DECEASED) and next of kin of (NAME OF DECEASED), date of birth (DATE OF BIRTH), U.S. passport number (PASSPORT #), and

That I, on behalf of my entire family, authorize (NAME OF PERSON RECEIVING POWER OF ATTORNEY) to handle all arrangements regarding the death of (NAME OF DECEASED), U.S. passport number (PASSPORT #) including, but not limited to, the report of death, handling and repatriation of the remains and inventory of (NAME OF DECEASED) personal effects; and

That my and my family's wishes are:

- (1) That there be no/an (PLEASE CHOOSE ONE) autopsy; and
- (2) That my (wife's/husband's/father's/mother's) remains be / should not be cremated (PLEASE CHOOSE ONE)
- (3) That there be the return of all bodily remains of (name of deceased) to the United States; OR that (name of deceased) remains be disposed of (HOW) in China;
and

That I, on behalf of my entire family, authorize (FULL NAME AS IN PASSPORT OF PERSON RECEIVING POWER OF ATTORNEY; PASSPORT NUMBER) to act on behalf of my family in all dealings with the Chinese authorities and the funeral home and the U.S. Consulate.

(Signature of Affiant)

Subscribed and sworn (or affirmed) to before me by _____
(Typed name of affiant)

at _____ on _____
(Address of Notary of Public) (Date)

(Signature of Notary Public)
(Seal)

(Typed name of Notary Public)